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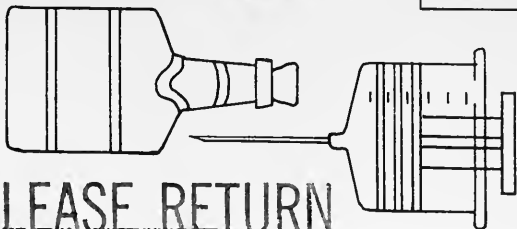
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The Habit



MONTANA ALCOHOL AND DRUG ABUSE DIVISION NEWSLETTER

Volume 7, Number 1

January-February, 1981

New Director Heads State Department Of Institutions

Carroll South is the new Director of the Department of Institutions. He assumed the top position in early January, shortly after his appointment by Governor Schwenden. Mr. South will be heading one of the largest and most diverse departments in all of Montana state government, one with a work force of approximately 2,200 employees and a fiscal year 1981 budget in the vicinity of \$51 million.

He has announced his top priority to be the improvement of security and additional staffing at the state prison in Deer Lodge. Some of the other important tasks he mentioned in an interview with *The Habit* include consolidating the administrative functions of the state facilities at Warm Springs and Galen, resolving the current problems with federal government over the operation of the Boulder River School and Hospital, and working towards a contract-for-services arrangement with community mental health centers across the state.

"I'm trying to impress on all the various divisions in the Department of Institutions the need for unity and coordination. We need to take the broadest possible perspective and always keep in mind the entire state's interests," he said.

Mr. South served as a Representative from Miles City in the Montana State Legislature for six years, and prior to that was a member of the Miles City city council for a year and a half. He has also had a lengthy career as a building contractor in the Miles City area. He and his wife Lois have two children.

Training Survey Says "Split" Sessions Popular

An opinion poll on the "split" training sessions held at Galen has been completed. Terry Stancliff, ADAD Training Manager, reports that all courses being given at both the Galen and Billings sites are getting excellent ratings and participants are pleased with the training they are receiving.

In addition, the results from a recent survey of program managers are in. They indicate that the majority of persons are interested in training in four categories:

- decision making in management
- technical writing
- supervision
- using internal evaluation

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Carroll South

90 Day Reports For Alcohol Programs

Each month all state approved alcohol programs reporting on the Alcohol Information System (AIS) will receive a computer output report called the "90 Day Caseload Report." This report contains information on open client admissions by facility, state client ID, admission date, program case number, type of care and client status. Please disregard the over 90 day indicator column, as it is only used at the state and indicates those clients who have been in treatment for 90 days.

The client numbers on this report represent what the state computer indicates as your program's active/inactive caseload (clients not discharged) at the end of each month. It is imperative that this report be reviewed carefully each month to check for any errors. Examples of errors, with the appropriate corrective action, are as follows: wrong or unidentifiable client—submit a discharge; active client who is not on the report—submit an admission, any errors in information—submit a corrected copy.

This report can be beneficial to you in keeping track of your monthly caseload. Once your 90 day caseload report is accurate the total number of clients (excluding DWI—09 type of care) on the printout represents your 90 day caseload for that month. You can then use this figure on the following month's Monthly Summary Report under Previous 90 Day Caseload—add your admissions, subtract your discharges to arrive at the Current 90 Day Caseload.

If you have any questions concerning this report or any AIS information, please contact Carrie Larsen or Debbie Hargraves at 449-2827.

Intervention: The Pros and Cons

The widespread use of direct confrontation techniques by counselors dealing with subjects who have alcohol or drug problems was the focus of a recent national conference, "Is Intervention The Answer? Ethical and Legal Aspects."

Though regarded by many professionals as the most effective strategy for getting alcoholics to enter treatment, the use of confrontation has numerous legal and ethical implications, according to conference chairman William Madsen, a professor of anthropology at the University of California at Santa Barbara.

The conference was held in response to reports of incidents across the country in which people who were targets of intervention techniques had their well being and civil rights violated. The program was sponsored by the Santa Barbara affiliate of the National Council on Alcoholism.

All the conference speakers agreed that effective intervention requires concern and loving motivation, without threats or coercion. They warned counselors against intervention unless a concerned friend or family member first comes forward to request help. Inadequate or inappropriate intervention methods can be extremely destructive.

Specific legal issues raised by confrontation techniques were discussed by Leslie Rothenberg, an attorney and university lecturer on ethics, law and medical practice. The alcoholic or addict must have the right to free choice after an intervention, and must never be coerced into treatment by the counselor or by friends, family or employers. Rothenberg cautioned counselors that they can face legal consequences if intervention occurs without an adequate diagnosis or without the family's sanction.

For more information, or to purchase cassettes of the conference, contact Kay Webb, National Council on Alcoholism, 4570 Calle Real, Santa Barbara, CA 93110.

—from the NIAA Clearinghouse

Prevention Grants For Fiscal 1982

Chick Canterbury, ADAD Prevention and Education Manager, anticipates the availability of about \$20,000 for prevention grants in FY 1982. These grants will be awarded approximately July 1, 1981 for use through June 30, 1982. All state approved programs will receive application packets by April 1, and the completed applications are due by June 1. Concepts for mini-grants can be discussed with Chick at any time.

Drug Programs At 103% of Capacity

by Skip Wilcox

The nine outpatient NIDA Drug Treatment Centers around the state have been providing services to drug abusers at maximum capacity. For the period from December, 1979 through December, 1980, the clinics were contracted to serve 350 clients per month. They are averaging 362 clients, for a 103% utilization rate.

The 103% is excellent, but even better is the fact that the quality of treatment is outstanding. The professionalism of the staff members at each clinic has made this possible.

As the Drug Supervisor for Montana, I want to add my thanks for your dedication to serving those in our state who need help with drug problems. The clinics serving Montana and worthy of this recognition are: Open Door (Anaconda); Rimrock (Billings); Second Story (Bozeman); Changes (Butte); Carousel (Great Falls); Placer Street (Helena); Kalispell; Kaleidoscope (Ronan); and Missoula Drug Treatment Center. All the staff members of these programs are to be commended. Keep up the good work



Al Goke, Administrator of the Highway Traffic Safety Division of DCA, answers a question at the Court School Training for Instructors session in Billings. Other panel

members were Don Bjertness, Billings City Judge (center) and Larry Majerus, Administrator of the Motor Vehicle Division of the Department of Justice (right).

Federal Report Says No To Warning Labels

A report to Congress by the Departments of Treasury and Health and Human Services "is on solid ground in its rejection of warning labels and its endorsement of public education programs as the effective way to reduce alcohol abuse problems," according to Samuel D. Chilcote, president of the Distilled Spirits Council of the United States (DISCUS).

The distilling industry spokesman also said, "We are gratified that the report distinguishes moderate drinking from problems associated with excessive use and that health and safety problems are set in the context of excessive drinking and alcoholism."

The federal report gave favorable mention to the DISCUS Code of Good Practice and recognized the self-regulation of advertising by the industry as preferable to restrictions imposed by government.

TREAD Project Stresses Coordinated Approach For Court School Instructors

The Training and Resource Education on Alcohol and Drugs (TREAD) project held two training sessions in January for court school instructors.

The three day-course held in Billings Jan. 13-15 drew 28 participants, and the session in Kalispell Jan. 27-29 was attended by 16. The focus at each session was on the administrative and educational processes. Panel discussions were held to give instructors a perspective on the entire statewide process. Members of the panel at each session were Larry Majerus, Administrator of the Motor Vehicle Division of the Department of Justice; Al Goke, Administrator of the Highway Traffic Safety Division of the Department of Community Affairs, and a local judge.

One of the key issues stressed at these ses-

sions was the need for the judicial, law enforcement and treatment sectors to work closely together to make the court schools program effective.

Criteria for the formal approval of court schools are being developed, according to Candis Compton, Manager of ADAD's Special Services Section and coordinator of the TREAD sessions. Court school instructors will receive three points toward certification for participating in these TREAD training sessions.

Feedback on the curriculum for these sessions has been quite good, and participants are viewing them as valuable opportunities to increase their professional competence and learn what's going on in other parts of the state.

Drug Quiz

1. Which drug is currently listed most often as the primary drug of choice by clients in the outpatient drug treatment clinics in Montana?

- A. Marijuana
- B. Hallucinogens
- C. Amphetamines
- D. Tranquilizers

2. An overdose of barbiturates for an average person is how many milligrams?

- A. 50
- B. 100
- C. 250
- D. None of the above.

3. Quality marijuana is selling in Montana by the lid (usually a short ounce) for

- A. Under \$20
- B. Under \$35
- C. Under \$60
- D. Over \$60

4. Marijuana is a plant product consisting of the dried leaves and flowering tops of the cannabis plant. When this plant is burned, how many different chemical compounds are released in the smoke?

- A. 1-10
- B. 50
- C. 100-200
- D. 400

Certification Reminder

by Bob MacConnel

There are still some program employees who have not registered for certification. All program directors and employees should be aware that failure to register within 30 days after the hiring date may affect program approval.

We again urge all applicants who have not already done so to complete and mail in the certification forms. We can do nothing towards your certification until we have this information, along with documentation.

Please inform us of any change of address or program employment. We can't credit you with monthly work experience points if you are terminated by one program and do not notify us of employment in another one.

Since the certification standards have been officially adopted by the State of Montana, it becomes our responsibility to comply with what now has the effect of law.

Address questions to Robert MacConnel, Training and Certification Section, ADAD, Helena, MT 59620

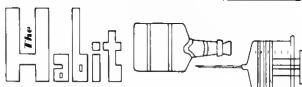
A person who spends one hour viewing daytime television serials will be exposed to three drinking episodes

from the Journal of Studies on Alcohol

July Conference On Youth Prevention

A conference on Rural School Prevention will be held July 12-18 for professionals from Montana, Idaho and Wyoming. The conference, sponsored by the Region 8 Training and Development Center in Oakland, California, will be held in a location convenient to the three target states. It will be one of the less expensive training sessions coming up, as there will be no tuition for participants.

Topics to be discussed include: why young people use drugs and alcohol; prevention strategies for school, community and home, and community and school coordination. The emphasis will be on providing practical prevention activities. More information will be carried in future issues of *The Habit*.



THE HABIT is the newsletter of the Alcohol and Drug Abuse Division of the State of Montana, Department of Institutions.

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Quaalude: A Safe Drug Gone Wrong

(Editor's note—The following article is excerpted from a longer story, "The Quaalude Saga," by Ronald Alsop, a reporter for the *Wall Street Journal*. The comments in the final paragraph are by Skip Wilcox, ADAD Drug Supervisor)

William H. Rorer, Inc. needed a name for its new, non-barbiturate sleeping pill. "We wanted something peaceful-sounding," recalls an executive, "something suggesting a quiet interlude."

Quiet interlude. Quaalude. It seemed perfect.

That was in 1965, the beginning of Quaalude's notorious and anything-but-peaceful history as one of this country's most abused drugs. It's the history of a useful and seemingly safe medication that went wrong.

Since the early 1970s, abuse of methaqualone, the generic name for Quaalude, has been rampant. High school and college students quickly took to the drug's mellow euphoric effects. Before long, comas and deaths from overdose were being reported, and the potentially lethal blend of methaqualone and alcohol became a popular cocktail at some parties.

Today methaqualone—which has been known by such brand names as Parest and Sopor but mainly still as Quaalude—is said to be more popular than ever, the darling of the disco set, savored for its reputed power to enhance sexual experience. "It's another embellishment of life in the fast lane," says Dr. Robert Chafetsky, a Philadelphia psychiatrist.

The U.S. Drug Enforcement Administration expects to seize 20 to 30 million methaqualone tablets this year, compared with 900,000 in 1978. Most of the confiscated pills are believed to be coming from Europe through Colombia.

"The abuse is terrible, worse than ever," declares Dr. John Davison, director of the Emergency Medicine and Trauma Department at Coral Reef General Hospital in Miami, Florida. He blames methaqualone for many of the traffic-accident cases he and his staff see.

Methaqualone users say they like the drug because it gives them a "cleaner high" than other drugs and alcohol. They say they feel more in control and don't have to worry about a hangover, alcohol on their breath or a "bad trip."

But the drug can slur speech and impair judgment and reflexes. Moreover, abusers risk severe psychological and physical addiction.

Some people believe Quaaludes became popular so quickly with drug abusers because they were promoted as safer than barbiturates. The initial sources of methaqualone were neighborhood doctors and pharmacies, although fewer want to prescribe the tainted drug today.

By 1973 the federal government had imposed very strict regulations on methaqualone, a controlled substance, over manufacturers' objections. That meant refilling of prescriptions was forbidden, the drug had to be stored in vaults and the DEA set production quotas. Still, the abuse continued.

But as U.S. companies and the government tightened controls over the domestic product, traffic has increased in lookalikes made abroad and smuggled into this country.

Of special concern is the discovery that the bootleg stuff sometimes isn't methaqualone at all. Lab analyses of confiscated tablets turn up everything from innocuous aspirin to the tranquilizer diazepam (more commonly known as Valium), to the highly dangerous phencyclidine, or PCP.

The misuse of Quaalude in Montana isn't currently widespread, but neither are we immune from its abuse. Quaalude is not a drug to mess with because it has many unhealthy side effects. For further information or some help, contact any one of the state's drug clinics



Steve Shumate



Carol Warford



Jeff Stothower



Ernie Hanson



Glenn Harwell

New

Faces...

In A Number of Places

Steve Shumate is the new Administrative Director of the Regional Chemical Dependency Program, Inc. in Missoula, which includes Missoula's Alcohol Services and Drug Treatment Programs.

Steve joined the program staff about six months ago. He worked for a year and a half as an alcohol counselor in Butte, and most recently he was the Alcoholism Advocate for Missoula County, where he helped set up the RCDP's In-digent Care System.

A native of the Midwest, Steve has a B.A. from Cornell College in Iowa and an M.S. in Addiction Counseling from North Dakota State University. He has lived in Montana for 2½ years, and he especially enjoys the cultural and academic opportunities in Missoula.

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Ernie Hanson recently joined the ADAD staff as a statistician. He is producing charts and reports based on alcohol services data, and he will be in charge of the Alcohol Information System (AIS). He is utilizing the Statistical Package for the Social Sciences (SPSS), a system of software for use on our IBM 370 computer. Our operating system uses dual 145 and 158 models in a loosely coupled OS/VS environment.

Ernie is a native Helenan with a degree in Physics from Montana State University. He served in the army for four years, two of them in Germany.

Glenn Harwell, Director of Placer Street, the Helena Drug Treatment Center, for the past three years, resigned at the end of January. His plans include beginning graduate work on a doctorate in Counseling next fall.

Glenn became the Director of Placer Street after earning a B.A. in Sociology from the University of Mississippi, an M.S. in Rehabilitation Counseling from Eastern Montana College, and serving as a counselor for the State Department of Parole and Probation.

Reflecting on his three years at the Helena satellite, he said, "I'm fortunate not to feel the 'burnout' that usually occurs in this kind of position. It's been an enjoyable time for me."

He pointed out that the center's client load has been stable at 100% of its allocated slots, and has increased during the past year. In addition, Placer Street has increased its level of professionalism and gone through a positive change of image from the perspectives of other agencies and the community at large.

• • • • •

Jean Erickson has been appointed Supervisor of the Alcohol Services Program at the Missoula RCDP. Jean has been with the program since its start in 1978. She was involved in the establishment of the "Alcohol Action" program, Missoula's first outpatient alcohol services. She also started an alcohol education program in School District #1 for students at the sixth, seventh and eighth grade levels. She was a bartender in Missoula for many years before entering the counseling field.

— continued on P. 4



Ken Anderson, Director of the Flathead Valley Chemical Dependency Center, presents checks to the winners of the center's poster and essay contest. Leslie Lee, left, was awarded \$100 for the best poster, and Kimber Hofer won \$100 for the best essay. Prize money was donated by

area beer distributors. The theme of the contest was "Chemical Dependency: A Family Disease." Kimber is a sixth grader, and Leslie is a senior at Columbia Falls High School.

Faces And Places

Jeff Slothower was recently named the Director of Changes, the drug treatment center in Butte

A native of Iowa, Jeff holds a B.A. from the University of Iowa and an M.S. in Psychology, with emphasis on the treatment of chemical abuse and addiction, from Washington State University. He served a three-month internship at the Flathead Valley Chemical Dependency Center in Kalispell before joining the staff at Changes as a counselor. After 15 months in that position, he was named Director of the Butte program in late December.

Jeff notes, "We've had an excellent working relationship with the criminal justice system, and I look forward to continuing that relationship."

Carol Warford is the new secretary at Placer Street. Carol attended Western Kentucky University and worked in the mental health field in Kentucky before moving to Montana two years ago.

She worked for the Department of Social and Rehabilitation Services and the Employment Security Division before joining the Placer Street staff.

"This isn't a typical secretarial position, I like the constant interaction with clients," Carol said.

Maxine Jacobson has moved up to assume the responsibility of Drug Supervisor for the Missoula drug program. She has been on the staff of the Missoula center for three years as a counselor, in her new position she will be responsible for all outpatient drug services in Missoula. She has an M.A. in Counseling

Drug Quiz Answers

- 1. C. Amphetamines. They are listed by 30% of the clients. Following in order of popularity are: Marijuana, 16%; Hallucinogens, 13%; Heroin and other Opiates, 10%; Inhalants, 10%; Barbiturates, Cocaine, "over-the-counter" and PCP, 10%, and Tranquilizers, 7%.
- 2. D. A person may overdose on any amount, depending on body tolerance, weight, height, etc. We all have different levels for an overdose. Drugs shouldn't be taken without a doctor's prescription. If used, they should be taken only as directed.
- 3. D. There are many varieties of marijuana that reach our state: Colombian, Mexican, Hybrid, Sinsemilla and local. The prices vary depending on the concentration of THC and the lack of seeds and stems. People have paid as much as \$225 for a super stony lid. Those who pay less than \$60 are usually buying less quality.
- 4. D. THC is one of these 400 chemicals that enter the body when pot smoke is inhaled. THC has been manufactured as a pure substance and is now available under limited conditions for clinical use. Marijuana, with 400 substances, has many detrimental side effects that pure THC doesn't.

Special Report On Alcoholism Available

Copies of the *Fourth Special Report to Congress on Alcohol and Health* should be available for distribution to the field in early March, according to NIAAA.

The current *Report* provides a range of updated information, and features a new chapter on intervention. Unlike its predecessors in 1972, 1974 and 1978, it makes no dramatic new claims or findings on the precise dimensions of the nation's problems with alcohol, and generally avoids what some critics of past reports have called "the numbers game."

Some of the highlights from the *Fourth Report* are as follows:

- During the 1970s, the nation's consumption of alcohol continued to rise, but the rate of increase slowed considerably.
- About 10% of adult drinkers are likely to experience alcoholism or problem drinking.
- About 85% of the population of alcoholics and problem drinkers are not receiving formal treatment.

The *Fourth Report* is available from the National Clearinghouse for Alcohol Information, Box 2345, Rockville, MD 20852.



County Plans In Review Stage

All the county plans have been received by ADAD, and they are being reviewed according to the established schedule. Counties will be notified regarding approval or non-approval by April 1, and those counties with problems will have until June 30 to provide the necessary clarification for approval. Technical assistance is available from ADAD upon written request.

History Quiz

Which six programs that received ADAD funds in 1976 are still in operation today?

- 6. Anaconda-Deer Lodge County Alcohol Services—Anaconda
- 5. Hill Top—Havre
- 4. Center—Kalispell
- 3. Flathead Valley Chemical Dependency Center—Glasgow
- 2. Rimrock—Billings
- 1. Providence Center—Great Falls

SUMMARY OF APPROVED ALCOHOL PROGRAMS AND STATE CONTRACTS

Fiscal Year	Number of Approved Programs	Number of Contracts Issued
77	22	21
78	29	26
79	38	31
80	36	22
81	32	20